

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 02, 2007 8:00 am**  
**Secretary of State**

04-02-2007 90062 038 \*\*\*150.00

**DOCUMENT # P03000145867**

1. Entity Name  
T & T W, INC.



Principal Place of Business  
1091 CASTILE ROAD SE  
PALM BAY, FL 32909

Mailing Address  
1091 CASTILE ROAD SE  
PALM BAY, FL 32909

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



03282007 Chg-P CR2E034 (12/06)

4. FEI Number  
54-2137055

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

WOOD, TERENCE V  
1091 CASTILE ROAD SE  
PALM BAY, FL 32909

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE PD  
NAME WOOD, TERENCE V  
STREET ADDRESS 1091 CASTILE ROAD SE  
CITY-ST-ZIP PALM BAY, FL 32909 ☐ Delete

TITLE VD  
NAME OLAUGHLIN, THOMAS  
STREET ADDRESS 115 W SEMINOLE AVE APT 107  
CITY-ST-ZIP MELBOURNE, FL 32901 ☒ Delete

TITLE ST  
NAME WOOD, TIMOTHEA  
STREET ADDRESS 1091 CASTILE ROAD SE  
CITY-ST-ZIP PALM BAY, FL 32909 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TREASURER, SECRETARY & DIRECTOR  
NAME WOOD, TIMOTHEA  
STREET ADDRESS 1091 CASTILE ROAD SE  
CITY-ST-ZIP PALM BAY FL 32909 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Terence V Wood*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/07  
Date

321-952-5159  
Daytime Phone #